STATE OF SOUTH DAKOTA RECEIVED Statement of Legal Newspaper Ownership and Circulation 2011

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER

The Dakota Herald

2. DATE

9-31-SEC. OF STATE

	The Dakota He	eraiu		9-21-11
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH 52		HED ANNUALLY		NUAL SUBSCRIPTION \$ 35.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)				
(Not printers) P.O. Box 207; Lemmon, SD 57638-0207				
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE				
PUBLISHER (Not printers) P.O. Box 207; Lemmon, SD 57638-0207				
6. FULL NAME OF PUBLISHER: LaQuita Shockley				
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME COMPLETE MAILING ADDRESS				
LaQuita Shockley		P.O. Box 207; Lemmon, SD 57638-0207		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.				
None				
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS		ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run)		1000		1000
B.PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.		127		146
Mail Subscription (Paid and or requested)		705		732
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		832		878
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR				
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		22		28
E.TOTAL DISTRIBUTION (Sum of C, D1 and D2)		854		906
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing		146		94
2. Return from News Agents	· · · · · · · · · · · · · · · · · · ·			
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)		1000		1000
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:				
- Alverta Licerta		Owner		
(Signature)		(Title)		
Sworn to before me this 21st day of Octob				day of October, 20 11
8 Alle M. Da			Du	
County of Perkins	Notary Public June 28, 2017			
		My commission expires:		

Form: SOS REC 051 7/2004